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File with: lowa Ethics and Campaign Disclosure Board 510 E. 12", Sta. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Reset Form

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## FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAGE

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For Instructions, See Back of Form	Reset Form	SCHEDULE A	MONETARY
CONTRIBUTIONS MONEY TAKEN IN		(Rov. 07/03)	MONETARY RECEIPTS
(Including candidate's personal funds)  COMMITTEE NAME (Must be same as an Statement of Organization)	1		CK THIS BOX IF NDING FORM
Committee for North Liberty Progress			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
11/05/2007	CK# <sub>Cheek</sub>	JMSwank Company/ConAgra Foods P.O. Box 365 North Liberty, 1A 52317		\$100.00	
11/05/2007	CK#	North Liberty Development Corporation P. O. Box 122 North Liberty, IA 52317		\$50.00	
11/20/2007	ID# CK# Check	South Slope Communications P. O. Box 19 North Liberty, 1A 52317		\$50.00	
11/20/2007	1D# CK# Check	Premier Automotive, Inc. 2 Lions Drive North Liberty, IA 52317		\$50.00	
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,,,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		TOTAL (Hist na	SUB-TOTAL	\$ 225.00	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

\$ 225.00

FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

Rev. 07/03)	MONETARY EXPENDITURES
CHEC	K THIS BOX IF

AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee for North Liberty Progress

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/19/2007	ID# CK#8999	Hybrid Publications/NL Leader P. O. Box 288 North Liberty, IA 52317	newspaper advertisement in North Liberty Leader	\$ 97.00
	ID#			
	CK#			
	ID#			-
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	ID#			
	CK#			
	····		SUB-TOTA	\$ 97.00

TOTAL (if last page of this schedule)

\$ 97.00

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.402(3)(i).)

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> > (for Schedule 8)

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COMMITTEE	COMINITIEE NAME (Aust be same as on Stelement of Organia	rganization)			THE THE PARTY		LOANS
Committee	Committee for North Liberty Progress					(Kev. U/AUS)	RECEIVED
NOTE: This & TOTAL UNPA	NOTE: This schedule reports money loaned to the committee which is de TOTAL UNPAID LOANS FROM <u>LAST</u> REPORTING PERIOD \$ 375.00	tles which is deposited in the committee account.	he committee acc	ours.		CHECK THIS BOX IF AMENDING FORM	S BOX IF FORM
PART   - #KO  (Ori invo	PART I - AKONETARY LOANS RECEIVED THIS REPORTING PERIOD (Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)	PERIOD vn il a thro paty is ds.)		PART II - MC	PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD (Loans forgiven must be reported on Schedule E In-kind Contributions.)	REPORTING PERIO	<b>0</b> 72
DATE RECEIVED (NAVIDDYR)	NAME AND ADDRESS OF LENDER R (Include Endorser's Name. If Applicable) 17	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN	DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AKOUNT REPAID
			w	12/18/2007	North Liberty Area Development Corporation P. O. Box 122 North Liberty, IA 52317		\$ 375.00
		ı					
	TOTAL (PART I)	v		TOTAL O	TOTAL CASH REPAYMENTS (PART II) From Schedue E - TOTAL LOANS FORGIVEN TOTAL OUTSTANDING LOANS END OF REPORT PERIOD	8 375.00 s 0.00 s 0.00	0 0
Disclosure la making a corriconsanguinity the same as c relationship or	"Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contribution is the same as candidate, but there is no familial relationship, enter 'not applicable' in the relationship column when it applies.	elationship of any relicionship of any relicionship of electric degrees. If surname of contra into applicable in t	ative pree of tributor is the		Page 1	of   (for Schedule F)	